

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	Not Yet Assigned
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	LINCOMYCIN DERIVATIVES POSSESSING ANTIBACTERIAL ACTIVITY
Attorney Docket Number::	342312004920
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	None
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Jason
Middle Name::	G.
Family Name::	LEWIS
City of Residence::	Hayward
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	2939 Kelly Street
City of mailing address::	Hayward
State or Province of mailing address::	CA

Postal or Zip Code of mailing address:: 94541

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Dinesh  
Middle Name:: V.  
Family Name:: PATEL  
City of Residence:: Fremont  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 45109 Cougar Circle  
City of mailing address:: Fremont  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94539

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Anandan  
Middle Name:: S.  
Family Name:: KUMAR  
City of Residence:: Fremont  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 45109 Cougar Circle  
City of mailing address:: Fremont  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94539

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US

Status:: Full Capacity  
 Given Name:: Mikhail  
 Middle Name:: F.  
 Family Name:: GORDEEV  
 City of Residence:: South San Francisco  
 State or Province of Residence:: CA  
 Country of Residence:: US  
 Street of mailing address:: 270 East Grand Avenue  
 City of mailing address:: South San Francisco  
 State or Province of mailing address:: CA  
 Postal or Zip Code of mailing address:: 94080

#### **Correspondence Information**

Correspondence Customer Number:: 25226

#### **Representative Information**

Representative Customer Number:: 25226

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/642,807	08/15/03
10/642,807	An application claiming the benefit under 35 USC 119(e)	60/403,770	08/15/02

#### **Assignee Information**

Assignee name:: VICURON PHARMACEUTICALS INC.  
 Street of mailing address:: 34790 Ardentech Ct.  
 City of mailing address:: Fremont  
 State or Province of mailing address:: CA  
 Postal or Zip Code of mailing address:: 94555